

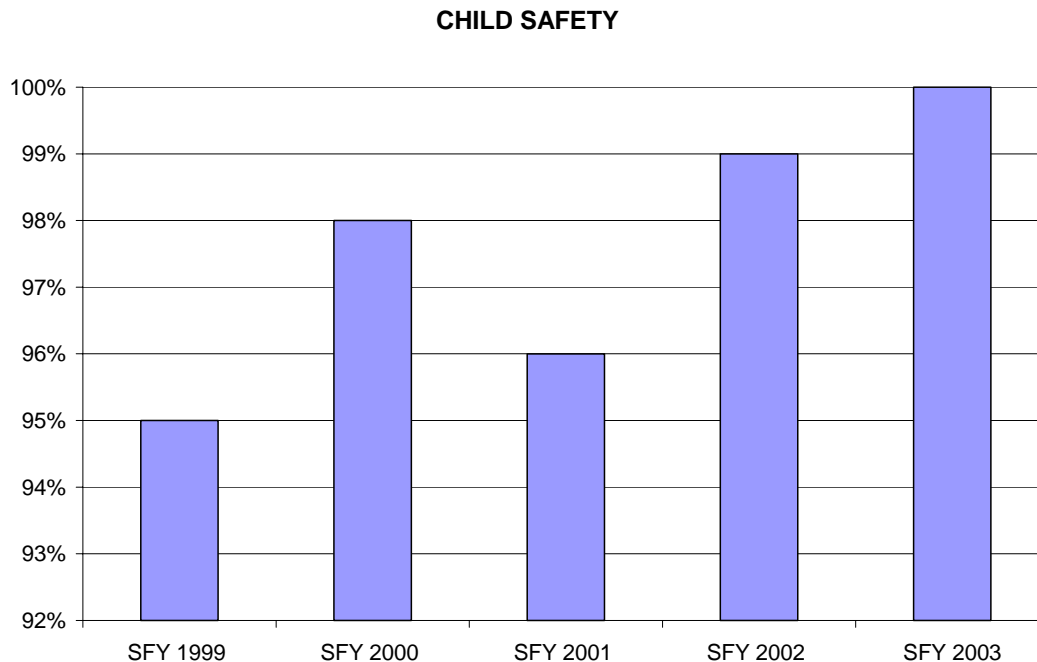
A. Safety

Outcome S1: Children are, first and foremost, protected from abuse and neglect.

Outcome S2: Children are safely maintained in their homes whenever possible and appropriate.

Trends in Safety Data

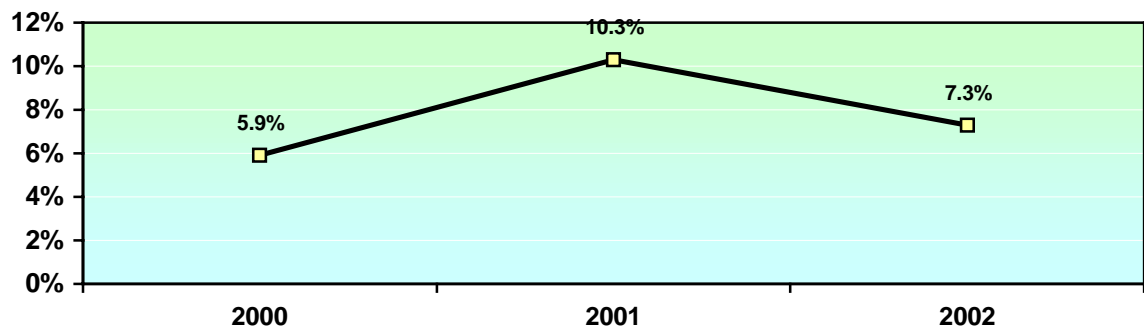
Missouri began a peer review process, specifically the Practice Development Review (PDR) in SFY-99 where safety of children, those placed in an alternative living setting and those children who were living with their families, is assessed at the time of the review. This is a point-in-time view and specifically analyzes the child status and the service performance of all agencies involved in this child's intervention. From SFY-99 through SFY-03, Missouri has reviewed actual practice for 395 children and their families. Safety has been the most consistent rating throughout the years of review. The graph below demonstrates the consistency.



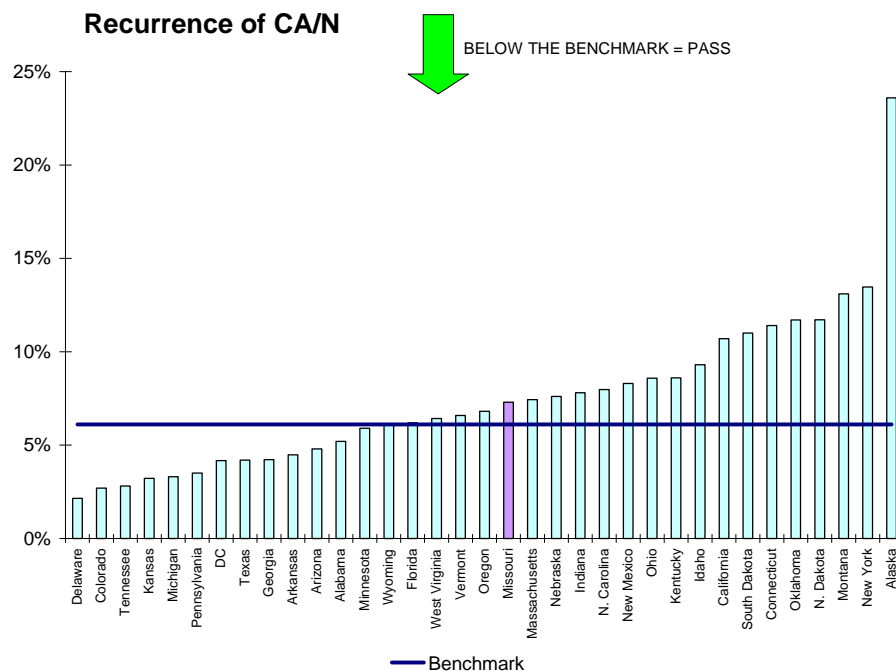
The chart below represents a federal outcome measure for Missouri's percentage of children who had a recurrence of a child abuse and neglect incident within six months of a prior one. The chart shows a significant increase in FFY-01. This may have been a reflection of a decrease in staff, created by hiring freezes. Hiring freezes leave unpredicted gaps in staff which may have impacted the service worker's ability to provide appropriate services. Without appropriate service, repeat behavior is more likely to reoccur.

Federal Benchmark
= 6.1%

**Percent of Children With Recurrence of Child Abuse/Neglect
within 6 Months**



It has been estimated that child abuse and neglect costs \$94.1 billion a year nationally in direct and indirect costs. Stakeholders as well as external partners in the round table discussion recognize multiple external contributing factors, such as poverty, unemployment, and drug use. They have speculated that the internal factors that have an influence on this measure are number of staff, caseload size, and structured decision making tools.



The chart above reflects how Missouri compares to other states reviewed on the recurrence of child abuse and neglect.

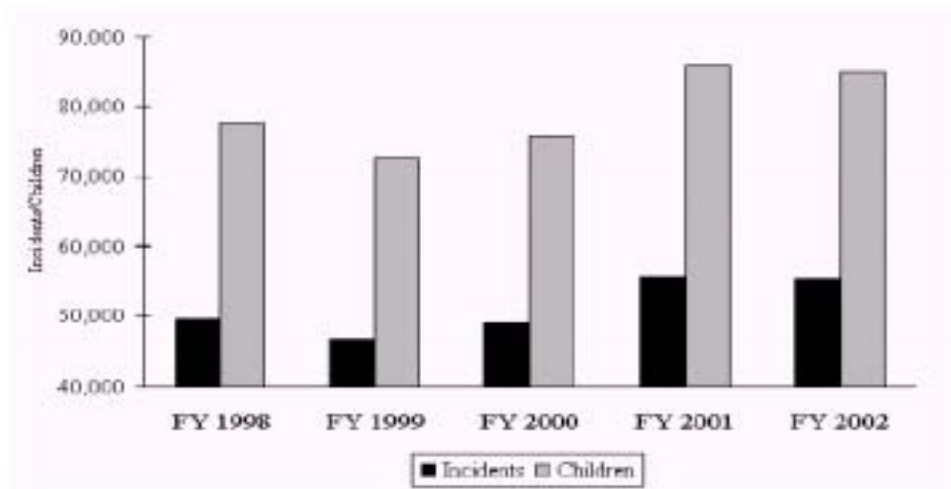
Child Maltreatment Safety Data Element I Reports of Child Abuse and Neglect

Data Profile information indicates the number of reports of suspected child abuse and neglect in Missouri increased from Calendar Year 2000 to Calendar Year 2001 by 8%. From Calendar Year 2001 to Calendar Year 2002, the number of reports increased by 1%. The number of duplicated and unique children reported mirrored these trends.

- There has been an increase in media awareness of child abuse and neglect issues in Missouri in recent years as a result of a few very high profile cases, beginning in 1999. As a result of a well-publicized death of siblings in late 1999, a number of legislative enhancements were made in the 1999-2000 General Assembly session. Senate Bill 757, which became effective in late August 2000, provided for school liaisons to be appointed in each school district of the state for the purpose of receiving information regarding all hotlines received on children enrolled in that district. As a result of this new practice, schools are notified within 72 hours of receipt of a report and are able to provide any information they might have on the identified children to assist the agency in the investigation/assessment of the report. At times, the notification to the school regarding the report creates an information-sharing platform that benefits the investigation process through additional information.

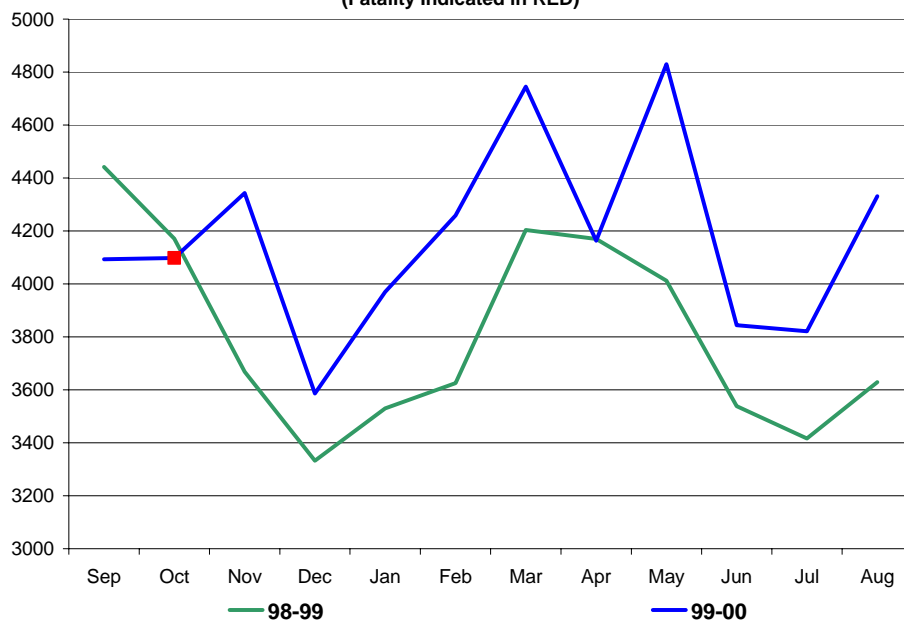
- Missouri recognizes the important role of the public in reporting suspected child abuse and neglect and encourages that in a number of ways. Public awareness strategies, such as inclusion of the Child Abuse and Neglect Hotline toll-free number in all telephone books, public education forums and close collaboration with schools and with other community partners contributes to a continuing increase in the number of hotline calls.

CA/N Incidents & Children

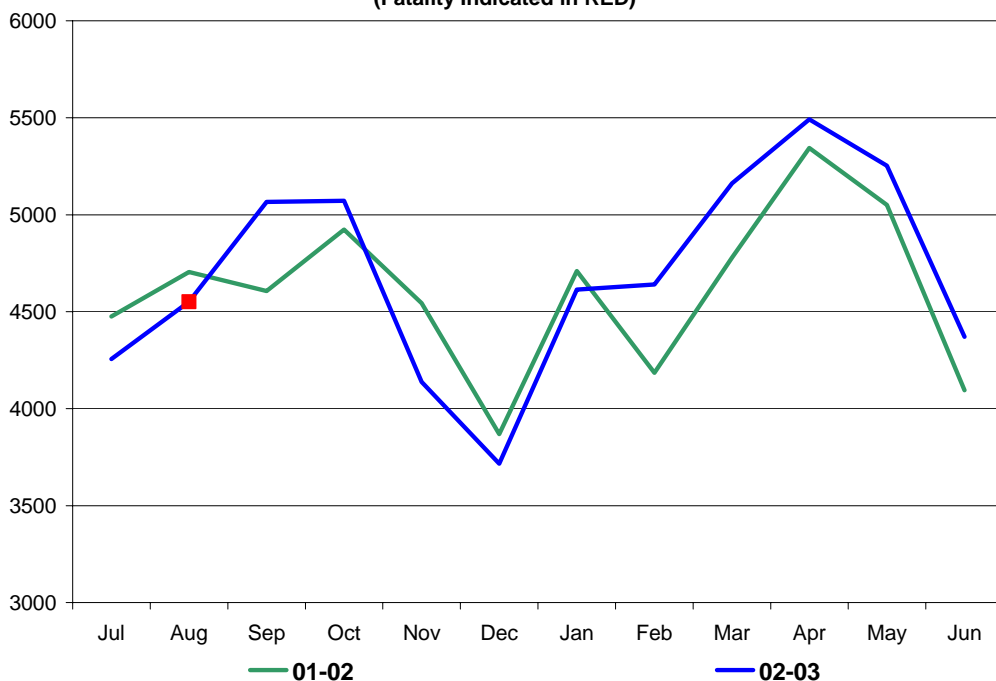


- The chart above illustrates the number of children that were involved in child abuse and neglect incidents from FFY-98 until FFY-02.
- Senate Bill 757 was followed by the release of the Missouri State Auditor's investigation of the Child Abuse and Neglect Hotline audit in December of 2000, which evaluated the hotline process of CANHU and field practices and policies. This audit was launched as a result of the previously mentioned sibling deaths. Throughout 2000, child welfare practice and policy in Missouri was under intense scrutiny. This media attention has heightened community concern regarding the protection of children and likely has contributed to an increase in the number of calls being made to the central Hotline Unit. The line graph below illustrates an increase in Child Abuse and Neglect reports following a high profile case. The media creates public awareness whereby citizens have a heightened awareness which results in a few months of more Child Abuse and Neglect reports.

CA/N Incidents by Month For the Year Before and Following A High Profile Child Fatality (Fatality Indicated in RED)



CA/N Incidents by Month For the Year Before and Following A High Profile Child Fatality (Fatality Indicated in RED)



- In August 2002, a two-year-old child placed in foster care died. The foster father was criminally charged with second degree murder. This tragedy prompted a series of reviews, audits, investigations, studies internally and externally by various commissions, including the Missouri Supreme Court Commission on

Children's Justice and the State Auditor report on the foster care system. The Children's Division appreciated all of the many recommendations which a number of those have already been implemented.

- **Child Abuse and Neglect Hotline Improvements.** Missouri's centralized Child Abuse and Neglect Hotline received 103,000 calls last year. 54% of these were child abuse or neglect reports, 29% were referrals and 17% were screened and determined not to meet criteria for abuse report, neglect report or referral.

The hotline unit operates continuously. Staff are available 365 days per year, 7 days per week, and 24 hours per day to assess calls of concern about the safety of Missouri's children. Staff with a baccalaureate degree in human services receives eight days of training and interview callers, assess for abuse, neglect or referrals, determine response priority, as necessary, and dispatch them to appropriate field offices.

To improve the consistency of call classification, protocols have been established. Protocols are an approach to managing calls and tools to support workers in gathering the correct information needed to determine if, how and when to respond to calls about children's safety. Protocols include set of questions guide interview of each call beginning with set of entry questions, followed by pathways based on caller's concern. Each of 28 pathways contains another set of questions to solicit critical information directly related to callers' concerns. Embedded in the pathways are a list of criteria based on Missouri's law, regulations and policy that if met cause a call to rise to the level of a child abuse or neglect report; or referral. The pathways also connect criteria to the appropriate response priority required by field. Structured decision making concepts developed by the Children's Research Center, are embedded in the pathways and guide the worker in making critical decisions. Closing protocols based on how the call is classified are designed to ensure each caller knows what action was taken.

To validate the protocols, Missouri begins a controlled experiment in late October 2003. Results will be ready in late November. The protocols are a significant enhancement to the tools currently provided to staff. Therefore, Missouri's plan is to analyze results from the experiment, make warranted adjustments, followed shortly thereafter by implementation throughout the entire unit as the new way that all calls are consistently managed at the hotline. Quality assurance methodology and tools have been developed to support this work as a continuously improving approach.

In addition, to improve responsive to callers, efficiencies will be created by automating the protocol process and implementing call management technology. Protocol automation will enable workers to enter information while interviewing callers; rapidly search databases for vital information; generate narrative,

automatically code information and correctly classify based on information entered.

Call management technology will not only allow queuing of calls by urgent safety concerns yet provides real time data for monitoring call volume and managing the unit to achieve maximum responsiveness. Both tools are scheduled for implementation in December, 2003.

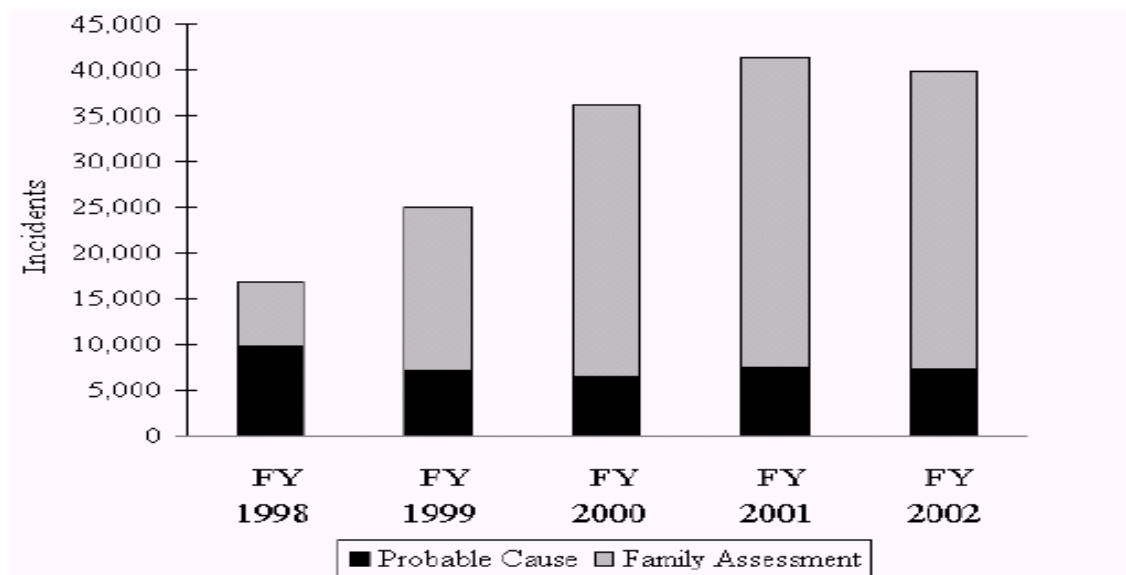
Child Maltreatment Safety Data Element II Disposition of Child Abuse and Neglect Reports

Data Profile information reports that the disposition of Child Abuse and Neglect reports in Missouri has not substantially changed from Calendar Year 2000 to Calendar Year 2002. The percentage of reports substantiated in Calendar Year 2000 was 12%. It was 12% again in 2001 and 13.6% in Calendar Year 2002.

- The disposition figures in the Data Profile must be considered in light of the multiple response approach to reports used in Missouri. In 2002, only 35% of the reports received were screened as investigations, and thus, would be the only ones considered in the substantiated and unsubstantiated rates. The high number of “Other” dispositions is accounted for by the number of reports screened as assessments and thus do not receive dispositions of substantiated or unsubstantiated.
- Missouri implemented a multiple response to hotline reports statewide in July 1999. This approach was piloted from 1995 to 1997 in five sites across the state as a result of the passage of Senate Bill 595 in 1995. The multiple response approach differentiates between reports accepted for investigation and those for assessment by more appropriately gearing the response of the agency to the safety of the child and the needs of the family, rather than approaching all reports with the same degree of immediacy and the same degree of law enforcement involvement. A two year evaluation completed by the Institute for Applied Research of St. Louis demonstrated that consumer satisfaction, staff satisfaction, and community partner satisfaction was greatly increased with the multiple response approach. Additionally, access to services for families was expedited and more appropriate. When a hotline report is received at the local level, a CPS Classification Screening form, CS-27, is completed to determine if the report should be handled as an “investigation” or as an “assessment”. Reports alleging child abuse or neglect, which, if substantiated would constitute grounds for criminal charges, must be screened as investigations. Reports that do not rise to this level may also be screened as investigations if other circumstances, such as repeated prior reports of the same nature, lead the screeners to believe an investigation approach would best serve the children involved. Field staff responding to investigations must solicit law enforcement involvement. The disposition of

investigations will be either “probable cause” (substantiated) or “unsubstantiated”. Reports that are not screened as investigations will be handled as a Family Assessment and initially will not involve law enforcement. Disposition of assessments will not result in a “probable cause” or “unsubstantiated” determination, but rather a determination of whether the family was linked to services within the first 30 days, services are needed on a continuing basis, or no services are needed. A second evaluation on the statewide results of the multiple response approach is underway at this time, but it is believed that implementation of this approach has contributed to the consistency in substantiation rates statewide as shown in the graph below.

Child Abuse and Neglect Reports With Findings of Probable Cause & Family Assessment



- The substantial increase in the duplicated children from Calendar Year 2000 to Calendar Year 2001 (from 74,412 children to 80,743 children) corresponds to some degree to the increase in the number of hotline reports in 2001. Another factor contributing to the recidivism may be the reduction in children's service workers in 2001.
- Missouri utilizes regional Child Assessment Centers in many parts of the state to coordinate the investigation process. These centers serve as a setting where children, reported to have been sexually or physically abused, are interviewed and often treated from the report of the abuse through disposition of the case. Joint interviews and a single medical examination can be conducted at many of these centers in a "child-friendly" atmosphere. The goals for the Child Assessment Centers are: to reduce the emotional trauma of the investigation to the child and the non-offending family members, to improve the ability of the Child Abuse Investigators to reach an appropriate finding, and to improve the multi-disciplinary collaboration at the community level. Presently, Child Assessment Centers exist in St. Louis City, St. Louis County, Kansas City, St. Joseph, Springfield, Joplin, Columbia, St. Charles, Hillsboro, Sedalia, Cape Girardeau, Branson West, Camdenton and Parkville. The importance of the Child Assessment Centers in regard to the disposition of reports is the degree of consistency afforded by utilizing the same highly trained interviewers and examiners.
- Missouri Senate Bill 757 mandated that all children residing in the home, regardless of their status as a non-victim, must be seen within 72 hours of the report and their safety insured. While the requirement is well-grounded, the

additional pressure on staff to meet these time frames is difficult in many cases. Senate Bill 757 also provided for the appointment of a Chief Investigator within each county Division of Family Services Office. The Chief Investigator is to insure that there is a timely response to all reports and that the safety of all children is verified. These safeguards have contributed to staff's ability to collect valuable information before making a disposition of the report.

- The State Auditor's report of 2000 found several reports (33) over a three period of evaluation that received no action because the county staff did not extract them from the automated referral system. The audit was unable to determine the historical magnitude of this error because the automated system only displays calls for a 3-month period. This fault was addressed immediately by a change in policy requiring all counties to check the ALOG screen numerous times each day to insure that all reports have been printed. The ALOG screen lists all reports that have been assigned to the individual county on any given day and also documents whether the report has been printed by the receiving county. It is unknown how this error would have impacted the substantiation rate prior to the implemented changes in Calendar Year 2000.
- The State Auditor's report of 2000 found that the State Child Abuse and Neglect Review Board overturned probable cause investigations that were appealed by the named perpetrator. The chart below provides statistics for state fiscal years 1999 through 2003. Each of the several Review Boards is composed of nine independent citizens who are appointed by the governor. Some of the board members must be from mandated reporter professions, such as law enforcement or child health care. There are term limits for the nine board members. Perpetrators of substantiated abuse or neglect investigations may appeal the disposition of their case to the Review Board. If the disposition is overturned, field staff must change the disposition in the case file and in the computer system. Currently this data is being analyzed to understand the increase occurred in overturned hotlines during SFY-03.

Child Abuse and Neglect Review Board (CANRB) Statistics

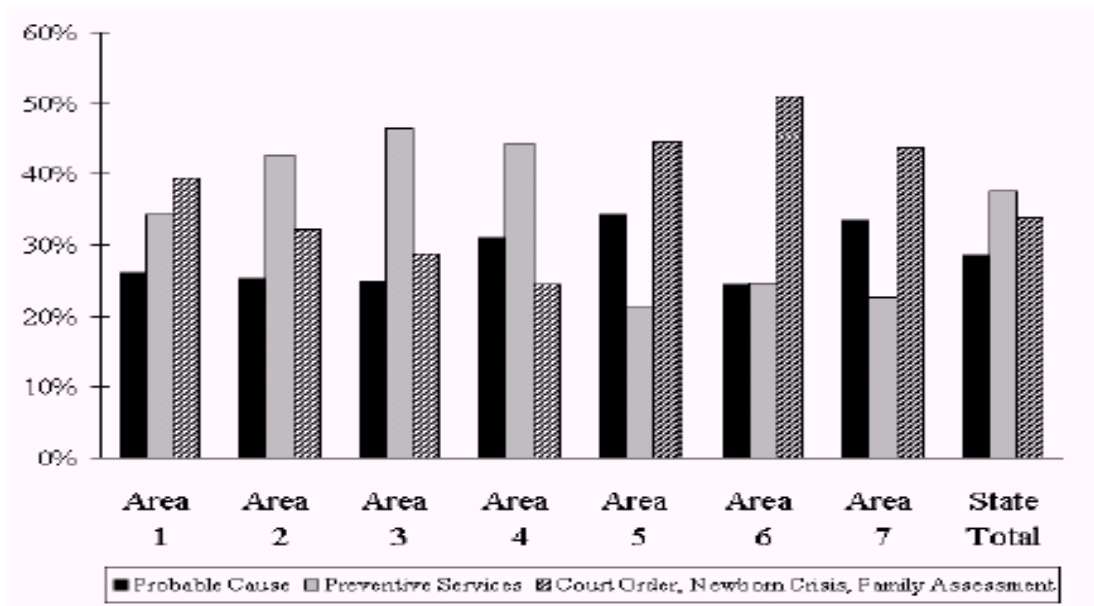
| Fiscal Year | # of Appeals | # Overturned | % Overturned |
|--------------------|---------------------|---------------------|---------------------|
| 1999 | 297 | 119 | 40% |
| 2000 | 234 | 81 | 35% |
| 2001 | 209 | 72 | 35% |
| 2002 | 237 | 83 | 35% |
| 2003 | 322 | 146 | 45% |

Cases Opened for Services Safety Data Element III

The Data Profile information regarding Cases Opened for Services shows an increase in children with open cases from Calendar Year 2000 to 2001 from 5,012 to 5,771 unique children, which mirrors the significant increase in children reported to the hotline from 2000 to 2001. A larger increase in child cases opened for services occurred from 2001 to 2002, (from 5,771 in 2001 to 7,702 in 2002) even though the number of children reported remained essentially the same.

- Missouri's analysis indicates the reported increase was due to system data in 2000 and 2001 actually under-reporting children open for services. When our research and evaluation team re-examined the data transmissions for 2000 and 2001, it became clear that some fields had not been adequately captured. Corrections made to the reporting fields resulted in a more accurate count of child cases opened for services in Calendar Year 2002. These system data corrections are not changes in policy or practice that impact children.
- Open cases and substantiation rates are not necessarily closely connected in Missouri. In addition to responding to many calls that fall outside the parameters of investigation and assessment, a substantial number of cases are opened for child protective services that were not the result of a "hotline" call. For example, 11,637 Family Centered cases were open at the end of June 2003. Of those, 3,756 cases were open due to substantiated CA/N investigation and 2,529 cases were open due to a family assessment. In addition to these post-investigative case openings, 3,478 cases were open for preventive services, 1,139 were opened due to a court order only and 735 were open due to newborn crisis assessments. The bar graph below illustrates the differences between administrative areas by reason of opening Family Centered cases.

***Family-Centered Services Cases Opened During FY 2002
by Reason for Opening***



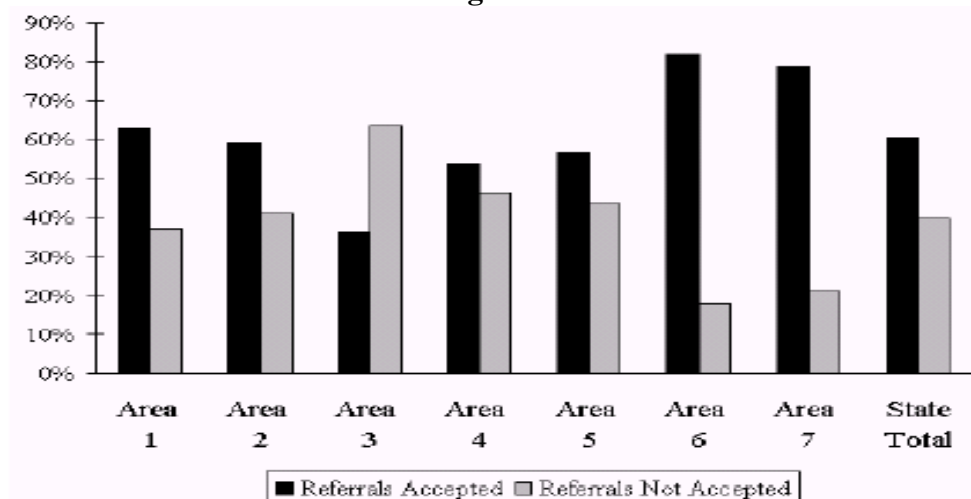
- Structured Decision Making technology includes a field risk assessment instrument, the CSP-1, CA/N Investigation/Family Assessment Summary. This tool guides field staff in determining if a case should be open, the risk level, and the immediacy and intensity of contact with the child and family. Utilization of this tool should provide guidance to the investigator/assessment worker in the decision to open a case for services, to determine risk, and to rank the priority of the case for the on-going worker in terms of first contact and the intensity of intervention needed to assure safety. Staff response to this new tool has been positive.
- One initiative in Missouri is the “System of Care” supported by the governor and the legislature, which heightens the cooperation between child welfare, mental health, education and the courts. One targeted goal is to “divert” children from the child welfare system who need mental health services but are not in danger from abuse or neglect. The child welfare agency in Missouri has received children for placement in alternative care who are in need of mental health treatment services not available to them if they remain in the custody of their parents. Missouri is considering as a solution to solve this problem by a Federal waiver to allow children to receive mental health treatment services without compromising the parents’ custody of the children.

Children Entering Care Based on (CA/N) Report Safety Data Element IV

Data Profile information reflects an increase in the percentage of unique children entering foster care based on a hotline report from 31.7% in Calendar Year 2000 to 32.5% in Calendar Year 2001. This percentage declined to 29.3% in Calendar Year 2002.

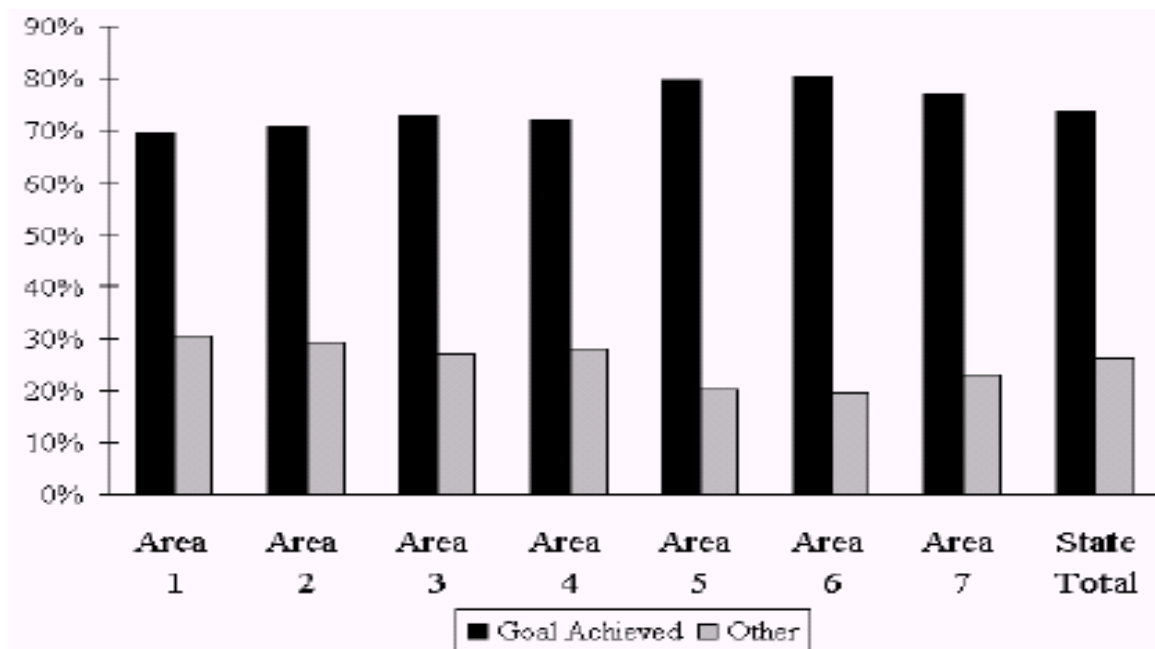
- The Missouri child welfare system has a number of in-home services available to children and families, including Family Centered Services (FCS), Intensive In-Home Services (IIS), in home counseling services, parent aide and other services through Children's Treatment Services (CTS). These services are essential in striving for the preservation of the family unit when abuse and neglect are issues facing the family. Missouri maintains that it is the quality of these services that has enabled the number of children entering care to slightly decline in 2002, in spite of the decrease in the amount of services available.
- The Intensive In-Home Services (IIS) program, previously known as Family Preservation Services, is a short-term, intensive, home-based, crisis intervention program that offers families in crisis the alternative to remain safely together, averting the out-of-home placement of children. IIS has 102 contracted staff and 15 in-house staff who provide services to families at immediate risk of having their children removed from the home. IIS served 1610 families and 3,332 children in FY 2002 and were able to preserve the family 95% of the time during the intervention. Of the families who received IIS services, 88% remained intact for three months following intervention and 79% of the families remained intact for a year. Without the IIS intervention, undoubtedly, many of these children would have entered out-of-home care. The bar graph shows how many referrals were made to the IIS and accepted. The referrals not accepted could have been due to no openings available, the child was deemed to be unsafe in the home or the family refused service.

**Families Referred to IIS
During FY 2002**



- Families entering the child welfare system may receive case management services that are referred to as Family Centered Services (FCS). The FCS model acknowledges the importance of conceptualizing the family as a system that is constantly interacting with other systems in its environment. The emotional, sociological, and environmental circumstances of the family and its members must be considered. The goal of these services is to assist the family in changing, as quickly as possible, conditions that bring, or could bring, harm to the children, and preventing their unnecessary out-of-home placement. These services are offered directly by front line staff. Approximately 12,000 families were open for FCS during June 2003. Families served include intact families without court involvement (25%) and families with court involvement (75%) who have children at home and/or in alternative care. The graph below illustrates terminated FCS cases during SFY-02 where desired goals were achieved in 73.6% of the families served.

***Family-Centered Services Cases Closed During FY 2002
by Reason for Closing***



- With the recent implementation statewide of Structured Decision Making, the CSP-1 risk assessment assists staff in determining the priority ranking for the family, including the frequency of worker contact and home visits. All FCS cases have the minimum requirement of one home visit a month by the child protective service worker. Peer Record Review results for 2002 indicate staff visits their FCS families one time per month approximately 82% of the time. These practices contributed to the rather stable rate of children entering out-of-home care.

- Missouri Medicaid has a variety of counseling services that are available in-home and there are a number of enrolled providers who provide these in-home services. Families in the rural and least populated areas of Missouri may have fewer choices in providers and may encounter waiting lists for in-home services.
- For families and children not eligible for Medicaid, or for services not covered by Medicaid, the division has a system of providing these services through Children's Treatment Services (CTS) funding. In-home services for counseling, parent aides, homemakers, mentors, resource development and other miscellaneous services can be purchased from contracted providers.
- The number of open FCS cases has declined over the years, from 14,864 at the end of July in 2000 to 11,637 at the end of June in 2002. The decrease in open FCS cases is very likely connected to the staffing freezes that began in early 2001 due to the budget deficits. Fortunately for Missouri, the IIS program and Medicaid services continue to be available. If this were not the case, most likely foster care entries due to CA/N reports would have likely been greater.

Child Fatalities Safety Data Element V

The Data Profile records that child abuse and neglect related fatalities in Missouri declined sharply from 48 in Calendar Year 2000 to 33 in Calendar Year 2001. In Calendar Year 2002, there was an increase to 35.

- Missouri has an internal fatality review process that was initiated in early 2001. Staff from the Division and the State Technical Assistance Team (STAT) began meeting to discuss patterns in child fatalities, to review cases to determine if the current and previous investigations were thorough, and to discuss areas of concern that relate to child fatalities. A statewide memorandum, CS01-27, was sent to Division staff in 2001 reminding them of the importance of the Child Fatality Review Panel and requiring the local Division representative to attend their panel's reviews. Counties were identified where the Child Fatality Review Panel process did not appear to be operating as mandated by Missouri law and this was called to the attention of Division staff as well as other panel participants. Seeing that improvements could be made in the Children's Division's internal review process, new protocol for reviewing child fatalities is now being developed. The information gathered will be used to strengthen policy and procedures when dealing with child fatalities and in particular those cases in which the family of the deceased has some history with the agency.

Recurrence of Maltreatment Safety Data Element VI

The Data Profile shows that recurrence of maltreatment increased significantly in Missouri from 5.9% in 2000 to 10.3% in 2001 and then declined to 7.3% in 2002. This pattern mirrors other indicators, decreasing in 2001 and improving in 2002, but still falling below the 2000 levels. Missouri's recurrence of maltreatment does not yet conform to the national standard for this indicator (6.1% or less).

- Missouri tracks the recurrence of maltreatment per judicial circuit and Division area on a quarterly basis in our Child Welfare Outcomes Report. Our 2003 fiscal year data indicates an improvement in repeat maltreatment to 6.0% for FY 2003.
- Repeat maltreatment poses some special challenges for Missouri. The multiple response approach in Missouri creates a smaller population of children who have a probable cause disposition because only children who are reported to have experienced serious child abuse or neglect are classified in the investigations count. Therefore, the population of children with the opportunity for recurrence of maltreatment is smaller, yet risk is higher resulting in higher likelihood of repeat maltreatment.
- As referenced earlier, Structured Decision Making technology is now being used in the field statewide to determine risk and safety during the "hotline" response. Risk assessment elements include the number of prior "hotline" reports, the parental history of maltreatment and any prior injuries to the child. As noted earlier, the CPS-1, Child Abuse/Neglect Investigation/Family Assessment Summary was piloted in 2002 in selected parts of the state and was gradually expanded to statewide implementation by May of 2003. It is anticipated the SDM approach will positively contribute to a reduction in the maltreatment recurrence rate in Missouri.
- Missouri has considerable evaluation and planning to do on the issue of repeat maltreatment. Staff systematically receives a history of prior reports and conclusions (including assessment and non-hotline referrals) when a new report is assigned to the county. The Structured Decision Making instrument in use in the field has been well received but is too new to have hard data on concrete outcomes. At this point, the child welfare system has not created procedures for examining cases of maltreatment, identifying patterns in circumstances, or correlating cases open for services to repeat maltreatment.

Incidence of Child Abuse and/or Neglect in Foster Care Safety Data Element VII

The Profile data on CA/N in foster care indicates that Missouri had a .52% of CA/N incidents in foster care in 2000, .60% in 2001 and .62% in 2002. Missouri does not yet meet the national standard of .57% or less on this indicator.

- The Child Welfare Outcomes Report for FY 2003 indicates an improvement to .60% on CA/N in foster care, although this rate still does not meet the national standard. The tragedy of a foster child death in 2002 and criminal charges of second degree homicide for the foster father have made CA/N in foster care a special concern in this state.
- Current child welfare policy and practice has some safe guards for child safety in out-of-home care. For example, staff is required to visit children twice a month, with one visit in the home with the foster family. Due to staff shortages, practice does not consistently conform to policy. Peer Record Review Results indicate that in calendar year 2002 staff visited the child twice a month approximately 63-70% of the time.
- Practice concerns have also emerged about the quality of staff visits with foster children and foster families. Accordingly, the Division has purchased a training curriculum entitled Confirming Safe Environments that focuses on assessing and assuring safety in out-of-home care. Specialized tools and instruments for helping staff assess safety are a part of the practice. The model was trained and implemented in three sites across Missouri in the spring of 2003 and those sites will be evaluated in September of 2003 to determine effectiveness and statewide feasibility. The model can assist child welfare staff in understanding all the interactive elements that contribute to stress in a foster family and will help staff be more aware of how a particular child can impact family functioning.
- Information System enhancements are critical in better addressing issues of CA/N in foster care in Missouri. At this point, the MIS system measures the incidents of CA/N in out-of-home care but does not have the capacity to separate out the incidents of CA/N by placement type. For example, it is difficult to extract how many CA/N incidents occurred in foster care, versus relative care or residential care. Further, the MIS system does not easily capture the history of CA/N reports and dispositions in residential care facilities, as the perpetrator named in the system is an individual versus an agency.
- The lack of a large pool of available foster parents remains a barrier to effective matching of children with foster parents. Statewide recruitment efforts for foster parents continue but the increases in adoptions by foster parents, the very low foster care payment rates and negative publicity about foster care are barriers to recruiting large numbers of new foster parents.
- CA/N reports regarding children in out-of-home care in foster care or residential care are screened as investigations and investigated by a specialized unit, the Out-Of-Home Investigative Unit (OHI) to better assure consistency, objectivity and quality. This approach creates some concerns for foster parents, however, as reports that would be screened as assessments for parents or relatives are screened as investigations for foster parents, resulting in the two findings of probable cause

or “unsubstantiated”. This practice leads to a higher rate of “substantiated” abuse and neglect in out-of-home care.

- The intense scrutiny of foster care has produced a number of recommendations from the organizations and commissions which have evaluated the child welfare system. Some of the recommendations pertain specifically to the screening of foster parents. The Missouri Supreme Court Commission of Children’s Justice recommended immediate implementation of fingerprinting for foster parent screening and a search of civil court records. The State Auditor’s report in 2000 also recommended fingerprinting and civil court record searches and emphasized the need for consistent and frequent foster child home visits. The governor has further identified fingerprinting as a priority for implementation and is presently seeking funding to assist in financing this change.
- Missouri continues to use the twenty-seven hour Child Welfare League of America Pride curriculum (called STARS in Missouri) for basic foster parent training. Adoptive parents must complete the STARS training and the twelve-hour Spaulding curriculum. Foster parents are also required to complete 30 hours of in-service training every two years for re-licensure. Ten in-service specialized training modules for foster parents are offered at the county or circuit level and foster parents are encouraged to seek out other in-service training opportunities which relate to the type of children placed in their home. Specialized Behavior Foster Parents (BFC), who cares for children with behavioral needs, attends an additional 18 hours of behavior modification training based on a model developed by People Places in Virginia. Career Foster Parents, who parent very difficult children, attend the 18 hours of BFC training and an additional nine hours of training on medication management, crisis intervention and other special issues. In some parts of the state, the BFC training is offered at large to any foster parent interested in attending. Efforts to continue to offer and encourage foster parent training opportunities will assist in lowering the rate of child abuse and neglect in foster care.
- Missouri has active foster parent associations in Springfield, Kansas City and St. Louis and a number of smaller association groups throughout the state. These groups act as an important resource for foster parents in providing support, expertise and advocacy.

Other Safety Issues

New Directions: As noted above, Missouri child welfare system is in the midst of a major transition that will impact all operations of the agency, including the safety of the children we serve. The establishment of the new Children’s Division was effective August 28th, 2003 and the first Children’s Division Director was appointed August 26th, 2003. There are a number of recommendations pending from various commissions and organizations that impact child safety. All of these factors have created an environment demanding effective change and accountability. Despite many decisions still pending at this time, priorities have been established and a strategic plan developed.

Prioritization: In general, the Missouri child welfare system has comprehensive policies that are very specific and based on good social work practice. The staff demands however remain very high, and the capacity of the staff to meet all the policy requirements is limited. The gap in worker capacity to meet all the policy requirements given the volume of reports, open cases and children in alternative care has been an issue for many years. The recent decline in both staff and resources due to the budget crisis beginning in 2001 has increased the problem. One of the challenges facing the Missouri child welfare issue is how to best target existing staff and resources for the most effective outcomes for child safety, permanency and well-being.